

**CITY OF LINCOLN, NEBRASKA
UNIT PRICE QUOTATION**

**CARPET CLEANING SERVICES
Specification 04-302**

Date:

TO DEPARTMENT/AGENCY REPRESENTATIVE:

FROM (CONTRACTOR):

PROJECT NUMBER:

PROJECT DESCRIPTION:

When making a quotation please breakdown the Total Cost into the following categories: Labor, Materials, Equipment, Overhead and Subcontractors Costs. Fill in the following Tables in the areas as shown. If an item does not apply, please do not make an entry in that column.

TIME OF COMPLETION

Estimated Start Date	
Number of Days to Complete	

LABOR/EQUIPMENT/MATERIAL COST TABLE

CONTRACTOR	RATE	UNIT	TOTAL \$ AMOUNT
Carpet Cleaning (Per Sq. Yard)			
Upolstery (Per Hour)			
Water Damage (Per Hour)			
Deoderizing (Per Sq. Yard)			
Other (Per - please state)			
Other (Per - please state)			
Other (Per - please state)			
TOTAL LABOR			

EQUIPMENT AND MATERIAL COSTS

ITEM	COST	% O. & P.	TOTAL \$ AMOUNT
Total Equipment Costs	Included in the Sq. Yard cost		
Total Materials Cost	Included in the Sq. Yard cost		

TOTAL PRICE (NOT TO EXCEED)

\$

FIRM:

BY:

ADDRESS

Change Order #:

Accepted:

Not Accepted:

PHONE

APPROVED BY:

Department/Agency Representative

DATE: